



#3

DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Attorney Docket No.	CRR0001
First Named Inventor	Holger Nolte, et al.
COMPLETE IF KNOWN	
Application Number	10/001,940
Filing Date	November 29, 2001
Group Art Unit	[Not Yet Assigned]
Examiner Name	[Not Yet Assigned]

☐ Declaration Submitted with Initial Filing OR ☒ Declaration Submitted after Initial Filing-- surcharge 37 CFR 1.16(e) required

COPY OF PAPERS
ORIGINALLY FILED

As a below named Inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SYSTEM AND METHOD FOR IMPLEMENTING A THREE-DIMENSIONAL GRAPHIC USER INTERFACE

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

11/29/2001

as U.S. Application No. or PCT International Application No.

10/001,940

and was amended on (MM/DD/YYYY)

(if applicable)

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C § 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or § 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Appl. No.(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application nos. are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States provisional application(s) listed below.

Application Number(s) Filing Date (MM/DD/YYYY)

DECLARATION – Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any U.S. application(s) or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application

U.S. Parent Application or PCT Parent No.	Parent Filing Date (MM/DD/YY)	Parent Patent No. (if applicable)

☐ Additional U.S. or PCT international application nos. listed on PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent Trademark Office connected therewith:

☒ Customer Number 25235

Place bar code label here ➡➡



25235

PATENT TRADEMARK OFFICE

OR

☐ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number
or Bar Code Label

OR ☒ Correspondence
address below

Name	Stuart T. Langley, Esq.					
Address	Hogan & Hartson, LLP					
Address	1200 17 th Street, Suite 1500					
City	Denver	State	CO	ZIP	80202	
C untry	US	Telephone	(720) 406-5335		Fax	(720) 406-5301

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor.

Given Name (first and middle [if any])				Family Name or Surname			
Holger				Nolte			
Inventor's Signature						Date 01/28/2002	
Residence City	Munchen	State		Country	Germany	Citizenship	Germany
Post Office Address	Plinganserstr. 14a						
Post Office Address							
City	Munchen	State		ZIP	81369	Country	Germany

☒ Additional inventors are named on _1_ supplemental additional inventor(s) sheet(s) PTO/SB/02A attached

DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet
Page 1 of 1

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Camilla				Horst			
Inventor's Signature		C. Horst			Date		01/28/2002
Residence: City		Munchen	State		Country	Germany	Citizenship
Post Office Address		Gebaustelstr. 4					
Post Office Address							
City		Munchen	State		ZIP	81541	Country
City		Munchen	State		ZIP	81541	Country
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Marc				Hoffman			
Inventor's Signature		M. Hoff			Date		01/28/2002
Residence: City			State		Country	Germany	Citizenship
Post Office Address							
Post Office Address		Kiem-Pauli-Weg 81a					
City		Neubiberg	State		ZIP	85579	Country
City		Neubiberg	State		ZIP	85579	Country
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Werner				Posch			
Inventor's Signature		W. Posch			Date		01/28/2002
Residence: City			State		Country	Germany	Citizenship
Post Office Address							
Post Office Address		Hochackerstrasse 4					
City		Oberhaching	State		ZIP	82041	Country
City		Oberhaching	State		ZIP	82041	Country